

RCE

FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 6, 2006.

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_01=FC:2253	=510=00-0P-	Signature			

Application Number:

09/765,535

Confirmation No. 1407

Filing Date

January 18, 2001

Inventor(s)
Title

Daniel S. Kwoh

A SYSTEM AND METHOD FOR ELECTRONICALLY

ESTIMATING TRAVEL COSTS

Group Art Unit

3626

Examiner Name

Rachel L. Porter

Docket No.

41592/E327

Date: October 6, 2006

MAIL TO: Mail Stop RCE

This is a Request for Continued Examination (RCE) under 37 CFR § 1.114 of the above-identified application.

This application is **not** an application of the kind specified in 37 CFR § 1.114(e).

THE STATUS OF THE APPLICATION IS AS FOLLOWS:
a. X Pending (no review proceedings active)
(1) X An Action was mailed by the Office on April 6, 2006, as to which no appeal
under 37 CFR § 1.191 has been filed and
a response under 37 CFR § 1.116 was mailed on
via Express Mail
with certificate of mailing under 37 CFR § 1.8
X that Action was a Final Rejection, the finality of which is to be
withdrawn by this Request
an appeal or civil action under 35 U.S.C. 141,145 or 146 has been
terminated
(2) Allowed: the Notice of Allowance was mailed by the Office on
the Issue Fee has not been paid
the Issue Fee has been paid and a petition under 37 CFR § 1.313 was
granted on 10/11/2006 HDEMESS1 00000038 09765535
02 FC:2801 395.00 OP
b. Pending (with review proceeding active) 03 FC:2202 25.00 0P

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Application No. 09/765,535

An appeal under 37 CFR § 1.191 has been filed. Applicant(s) hereby withdraw that appeal and request reopening of the prosecution of the application.

2.	SUBMISSION(S) REQUIRED (check at least one)			
	a.	Previous	ly submitted	
			Consider the amendments/reply under 37 CFR § 1.116 previously filed on	
			Consider the arguments in the Appeal or Reply Brief previously filed on	
			Other:	
	b.	Enclosed	l	
		<u>X</u>	Amendment/Reply	
			Affidavit(s)/Declaration(s)	
			Information Disclosure Statement	
			Documents under 37 CFR § 1.48	
		<u>X</u>	Petition for Extension of Time	
			Other:	

The Examiner is requested to telephone the undersigned promptly following receipt and initial review of the application in light of the Submissions(s) for the conduct of, or the scheduling of, a telephone interview in the application.

Please direct all correspondence to CUSTOMER NUMBER 23363. Direct telephone calls to 626/795-9900, CHRISTIE, PARKER & HALE, LLP, P.O. Box 7068, Pasadena, CA 91109-7068.

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By

Wesley W. Monroe Reg. No. 39,778

626/795-9900

WWM/rjf

REQUEST FOR CONTINUED EXAMINATION (RCE) FEE CALCULATION SHEET

Application No. 09/765,535

PART I — BASIC FEE					
BASIC FEE	Small Entity \$395.00	Large Entity \$790.00	\$395.00		

PART II — ADDITIONAL CLAIMS (compared to application before RCE)						
	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims	28	*27	1	1 x \$25.00	0 x \$50.00	25.00
Independent Claims	5	**5	0	0 x \$100.00	0 x \$200.00	0
First Presentation of Multiple Dependent Claim \$180.00 \$360.00						0
TOTAL CLAIMS FEE					\$420.00	

List Independent Claims: 1, 12, 14, 17 and 21

- 1. FEES (The RCE fee under 37 CFR § 1.17(e) is required by 37 CFR § 1.114 when the RCE is filed.)
 - a. Amount (total from Fee Calculation Sheet) A check for \$420.00 is enclosed.
 - b. X The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required for this transaction to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. A duplicate copy hereof is enclosed.

RJF PAS704534.1-*-10/6/06 9:57 PM

^{*} IF THE "HIGHEST NUMBER OF TOTAL CLAIMS PREVIOUSLY PAID FOR" IS LESS THAN 20, WRITE "20" IN THIS SPACE.

^{**} IF THE HIGHEST NUMBER PREVIOUSLY PAID OR IS 3 OR LESS, WRITE "3" IN THIS SPACE.